## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000006467

**Entity Name: SOLSTICE MARKETING CORPORATION** 

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	ERSON ROAD NY, NJ 07054379	53			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	ERSON ROAD NY, NJ 0705437:	53			
FEI Number:	51-0414578 F	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Curi	ent Registered Agent:	Name and Address	of New Registered Agent:	
103 N. MEI	. CORPORATE R RIDIAN STREET SSEE, FL 323010	ESEARCH,LTD., INC. 000 US			
	named entity sub e of Florida.	mits this statement for the pu	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUF	RE:				
	Electronic	Signature of Registered Ager	nt	Date	
Election Can	npaign Financing Tr	ust Fund Contribution ( ).			
OFFICERS	S AND DIRECTO	RS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () Del GOTTARDI, CLAUD 801 JEFFERSON F PARSIPPANY, NJ	olo Coad	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DCFO () Del JUDGE, JOHN 801 JEFFERSON F PARSIPPANY, NJ	COAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	COO () Del JANKOWSKI, EDW 801 JEFFERSON F PARSIPPANY, NJ	ARD COAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () Del GOODRIDGE, ALL/ 140 BROADWAY, S NEW YORK, NY 10	AN D SUITE 3100	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AS () Del ULLMANN, MARY 801 JEFFERSON F PARSIPPANY, NJ	OAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CD () Del GOTTARDI, CLAUD 801 JEFFERSON F PARSIPPANY, NJ	NO COAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered. 01/10/2005

SIGNATURE: MARY ULLMANN AS